

APPENDIX 3

Indicator #2. MODERNIZATION

PHA/RMC/AME: FYE: Date:

Has the management function for all or part of indicator #2 been assumed by an RMC/AME?

Yes, Component(s) _____ No

Component #1, Unexpended Funds Over Three FFYs Old. Use the FFY that ended during the PHA's FY.

The reviewer should first examine the information in the LOCCS freeze file which should show all the grants over three FFYs old with unexpended funds. In addition to LOCCS screen Q29, Grant Obligated/Expended Query, the reviewer may find it useful to review screen Q08, Project Disposition History, especially if the reviewer suspects a problem or is reviewing a troubled or mod-troubled PHA.

Complete for EACH CGP, CIAP and LBRAP Award

	Type	Award	Orig		Last		Appvl	Source	Balnce
			Date	Exp	Date	Exp			
1st			10/01/						
FY			09/30/						
2nd			10/01/						
FY			09/30/						
3rd			10/01/						
FY			09/30/						

Total:

Source: LOCCS screen Q29; Q08; and/or PHA documentation.

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Component #1, Continued:

Verification Questions		Yes	*No	N/A
1.	Is the grant award more than three FFY's old?			
2.	Is the balance of unexpended funds zero?			
3.	Will leftover unexpended funds be recaptured			

in an audit?

Source: Form HUD-52825 (CIAP or LBP); form HUD-52837 (CGP); form HUD-53001 (CIAP, CGP or LBP).

- 4. Does HUD-approved original Implementation Schedule allow for longer than three FFYs to expend funds?

Source: Form HUD-52525, Part III (CIAP or LBP); form HUD-52837, Part III, (CGP).

- 5. Enter original Implementation Schedule expenditure deadline date:

- 6. Has the PHA extended the expenditure deadline within 30 calendar days after expenditure deadline?

- 7. Revised expenditure deadline:

Date PHA revised:

Source of revision:

- 8. Are reasons for extension based on factors outside the PHA's control?

Source: Form HUD-52525, Revised Part III (CIAP or LBP); form HUD-52837, Revised Part III (CGP); and/or PHA documentation.

* All "No" answers should be explained below or attached:

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Component #2, Unobligated Funds Over Two FFYs Old. Use the FFY that ended during the PHA's fiscal year.

Complete for EACH CGP, CIAP and LBRAP Award

Prog #:	ACC Date:	Date Award	Orig Last		Oblig Date	Oblig Date	Oblig Source	Approval Balnce
			Date Oblig	Appd Actual				
1st	10/01/							
FY	09/30/							
2nd	10/01/							
FY	09/30/							

Total:

Source: LOCCS screen Q29; Q08; and/or PHA documentation.

- | Verification Questions | Yes | *No | N/A |
|---|-----|-----|-----|
| 1. Is the grant award more than 2 FFY's old? | | | |
| 2. Is the balance of unexpended funds zero? | | | |
| 3. Does HUD-approved original Implementation Schedule allow for longer than two FFYs to obligate funds? | | | |

Source: Form HUD-52825, Part III (CIAP or LBP); form HUD-52837, Part III (CGP).

- | | | | |
|--|--|--|--|
| 4. Enter original Implementation Schedule obligation deadline date: | | | |
| 5. Has the PHA extended the obligation deadline within 30 calendar days after obligation deadline? | | | |

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Component #2, Continued:

- | Verification Questions | Yes | *No | N/A |
|---|-----|-----|-----|
| 6. Revised obligation deadline:

Date PHA revised:

Source of revision: | | | |
| 7. Are reasons for extension based on factors outside the PHA's control? | | | |

Source: Form HUD-52525, Revised Part III (CIAP or LBP); form HUD-52837, Revised Part III (CGP); and/or PHA documentation.

* All "No" answers should be explained below or attached.

Component #3 - Adequacy of Contract Administration. Evaluates a PHA's ability to manage contract administration for capital improvement funded programs.

Complete for EACH CGP, CIAP, LBPR, HOPE VI, VRP Award:

Date of FO	Days Before	* If Less Than 75 Days, Date of Previous	Number Program of	Date of PHA's
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Report	FYE*	Report	Type	Findings	Response
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Component #3, Continued:

Findings: (If no findings, go to next component.)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

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Component #3, Continued:

Verification Questions -

Based on PHA's Response Letter

Yes *No N/A

1. Has the PHA corrected all findings?
2. Is the PHA in the process of correcting all findings?
3. Has the PHA initiated corrective action for all findings?
4. Did the corrective actions initiated result in progress toward correcting the findings?

Source: HUD/COE inspection report; PHA response.

Verification Questions -

Confirmatory Review

Yes *No N/A

5. Has the PHA corrected all findings?
6. Date State/Area Office cleared findings:

7. Is the PHA in the process of correcting all findings?
8. Has the PHA initiated corrective action for all findings?
9. Did the corrective actions initiated resulted in progress toward correcting findings?

* All "No" answers should be explained below or attached.

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Component #4 - Quality of the Physical Work. Evaluates the quality of physical work for Capital improvement funded programs.

Complete for EACH CGP, CIAP, LBPR, HOPE VI, VRP Award:

Date of FO Report	FYE*	Days Before Report	* If Less Than 75 Days,		Number of Findings	Date of PHA's Response
			Date of Previous Report	Type		

Findings: (If no findings, go to next component.)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

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Component #4, continued:

Verification Questions - Based on PHA's Response Letter	Yes	*No	N/A
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1. Has the PHA corrected all findings?
2. Is the PHA in the process of correcting all findings?
3. Has the PHA initiated corrective action for all findings?
4. Did the corrective actions initiated result in progress toward correcting the findings?

Source: HUD/COE inspection report; PHA response.

- | | |
|---|-------------|
| Verification Questions -
Confirmatory Review | Yes *No N/A |
|---|-------------|
5. Has the PHA corrected all findings?
 6. Date State/Area Office cleared findings:
 7. Is the PHA in the process of correcting all findings?
 8. Has the PHA initiated corrective action for all findings?
 9. Did the corrective actions initiated resulted in progress toward correcting findings?

* All "No" answers should be explained below or attached.

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Component #5 - Budget Controls. Examines PHA's fund expenditures for all capital improvement funded programs to determine that expended funds were on work identified in HUD-approved five year plan or budget, or had prior HUD approval for required budget revisions.

Verification Questions

1. List work items for which a PHA expended funds in the latest FY for each active CGP, CIAP, LBPR, HOPE VI and VRP which were not in HUD-approved five year plan or budget.

Grant #:	Emergency Work Item	Date Funds Expended	Date of HUD Approval or Revision
	Work Item (Yes/No)		

2. Are there any work items identified with funds expended prior to HUD approval? |_ | Y |_ | N

Source: Form HUD-52525 (CIAP or LBPR); form HUD-52837 (CGP); and/or PHA documentation.

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Summary

Component #1, Unexpended Funds Over Three FFYs Old:

Initial Grade: _____ Confirmed Grade: _____

Component #2, Unobligated Funds:

Initial Grade: _____ Confirmed Grade: _____

Component #3, Contract Administration:

Initial Grade: _____ Confirmed Grade: _____

Component #4, Quality of the Physical Work:

Initial Grade: _____ Confirmed Grade: _____

Component #5, Budget Controls:

Initial Grade: _____ Confirmed Grade: _____

Overall Indicator

Initial Grade: _____ Confirmed Grade: _____

Reviewer: